

AUTOMATED SCHEDULING OF EMERGENCY
PROCEDURE BASED ON IDENTIFICATION
OF HIGH-RISK PATIENT

ABSTRACT OF THE DISCLOSURE

A system and a method for scheduling an emergency procedure in response to detecting that a patient has a high probability of acute myocardial infarction. The system is able to identify patients that are suspected of having acute myocardial infarction (or acute ischemia). The system uses one or more expert software tools or algorithms to analyze received ECG records. Each software tool has logic (e.g., thresholds and/or settings) for automatic routing which is configurable by the customer via a graphical user interface. If any sufficient condition for automatic routing is satisfied, the system routes the data (including the underlying ECG record) and an alert to an electronic device which is accessible by the cardiologist "on call" via a bidirectional pager. If the cardiologist decides that the requested emergency treatment or procedure should be performed, the system accesses the schedules of all associated catheterization labs across multiple hospitals to identify a lab having optimum time-to-treatment. Then the system automatically contacts the selected catheterization lab via a network to schedule the PTCA procedure.